Effective October 1, 2000							09/743682					
		CLAIMS A	(Column	PART I	(Column	n 2)	SMALL E	MIITY	OR		R THAN ENTITY	
TOTAL CLAIMS				Ŕ		A) 25 8	RATE	FEE	7	RATE	FEE	1
FOR			NUMBER FILED NUM		NUMBER	EXTRA	BASIC FEI	150	OR	BASIC FEE	-	1
TOTAL CHARGEABLE CLAIMS			Jaminus 20=			ej.	X \$ 9=	115	1	X\$18=		1
INDEPENDENT CLAIMS			/ 2 minus 3 = '			67		400	OR		<u> </u>	4
MULTIPLE DEPENDENT CLAIM P						$\overline{\Box}$	X40=	1400	OR	X80=		-
1	the difference	in column 1 ie	less than zero, enter "0" in column 2			+135=		OR	+270=			
•	nic dincronde	1	-W以	KITC.	with a	imn z	TOTAL	938	OR	TOTAL]
	C	LAIMS AS A (Column 1)	MENDED	- PART (Column	H OIS	olumn 3)	SMALL	ENTITY	OR	OTHER SMALL		
t		CLAIMS	Total Sec.	HIGHES	T			ADDI-	7	OMALL		┪
	<i>3</i>	REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	RESENT EXTRA	RATE	TIONAL		HATE	ADDI- TIONAL FEE	İ
	Total		Minus	**			X \$ 9=		OR	X\$18=	ree	1
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*	FIRST PRESE	NTATION OF MI	JLTIPLE DEP	ENDENT C	LAIM				OR	7.00		┨
	took same had done		N N/ T	201			+135 =		OR	+270=		
							TOTAL ADDIT FEE		OR ,	TOTAL ADDIT, FEE		
		(Column 1)		(Column	2) (C	olumn 3)			_	. ==•]
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	维持	HIGHES NUMBEI PREVIOUS PAID FO	R PI	RESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· //:	Minus	(1	Jet 1	X\$ 9=		ОВ	X\$18=		1
	Independent	• 1	Minus		=		X40=	1		X80=		1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR			1
							+135= TOTAL		OR	+270= TOTAL	ļ	1
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		(Column 1)		(Column		olumn 3)						
•	িস্তঃ প্রতিভাগ	REMAINING	1	HIGHES NUMBEI	PI	RESENT		ADDI-			ADDI-	1
	लोक्षेत्रकः है। -	AFTER AMENDMENT	A STATE OF	PREVIOUS PAID FO		EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	••	=		X\$ 9=		OR	X\$18=	l.	1
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_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	A Papare 1	OR	var der	- 4 - 4 - 2	
	I the optour set	nn 1 is less than th	ne entry in colur	nn 2, write "0	" in column	ı 3 .	+135=		OR	·+270= ·		
•	the entry in colui											
•••	f the "Highest Nur I the "Highest Nu	mber Previously Pa mber Previously Pa lber Previously Pa	aid Fer IN THIS aid For IN THIS	SPACE is le	ss than 20	enter "3 "	TOTAL ADDIT. FEE			TOTAL ADDIT FEE		1

FORM PTO-675 (Rev 8/00)

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